•			ج,	_			_ 1/	911	X1X	<i>7</i>	4	10.	d
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application or Docket Number  09 893, 02    1239    12													
CLAIMS AS FILED - PART I SMALL ENTITY  (Column 1) (Column 2) TYPE										A	OTHER'SMALLE		
TOTAL CLAIMS			31				RATE	FI		<u> </u>	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC F	EE 355	5.00 O	R	ASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			3/ minus 20=		• 11		X\$ 9-		o o	R	X\$18=	198	
INDEPENDENT CLAIMS			5 minus 3 -		. 2		X40=		-	R	XB0=	140	
MU	LTIPLE DEPEND	ENT CLAIM PI	RESENT				+135			A	+270=		
* If the difference in column 1 is less than zero, enter "O" in column 2								+	——————————————————————————————————————	R	TOTAL	1065	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											THAN		
V		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	EST BER OUSLY FOR	PRESENT EXTRA	RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE	A
MENDMENT	Total •	<b>3</b> \	Minus	-3	1		X\$ 9-		c	R	X\$18=		2
MEN	Independent	. 5	Minus	***	5	-	X40-		$\Box_{c}$	R	X80≃		
Ľ	FIRST PRESEN	ITATION OF M	ULTIPLE DEF	PENDENT CLAIM			+135	.		R	+270=.		AVAILABLE COPY
								AL C	<u></u>	)R	YOTAL ADDIT, FEE		Ω
5 -   - 06 (Column 1) (Column 2) (Column 3)													윙
AMENOMENT B	-	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST VIBER TOUSLY O FOR	PRESENT EXTRA	RATI	TIO	NAL EE		RATE	ADDI- TIONAL FEE	~
OSTA	Total	. 31	Minus	••	31	•	X\$ 9		d	Ж	X\$18=		İ
(ME)	Independent	• 4	Minus	***	5	3	X40-			R	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								T		Я	+270=		1
								<u> </u>		R	TOTAL ADDIT, FEE		
8-25-06 (Column 1) (Column 2) (Column 3)											•	}	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HESY MBER NOUSLY D FOR	PRESENT EXTRA	RATI	110	NAL EE		RATE	ADDI- TIONAL FEE	
D M	Total	• 31	Minus		31	٠	XS 9			ЭR	X\$18=	. 7	1
		• 4	Minus	•••	5	•	X40	╅	_	)A	X80=		1
كا	FIRST PRESE	NTATION OF N	IULTIPLE DE	PENDE	IT CLAIM		+135	╂-	(`		+270=	<del>                                     </del>	1
• If the entry in column 1 is less than the entry in column 2, write "O" in column 3.										SE SE	TOTAL		ł
-	"If the entry in column 1 is less than the entry in column 2, write "of in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												1
1	The Highest Num	ber Previously Pa	uid For' (Total o	r Indepen	iden() is th	e nighest number	tound in th	epprop	nace dox (	n ot	AMINI I.		ł

FORM PTO-875 (Res. 8/07)